

**CLAIMS ONLY .**

Application Number

Filing Date

Applicant(s)

878-060

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1			1			
2				1		
3				2		
4				2		
5				2		
6				2		
7						
8						
9						
10				1		
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50						
Total Indep						
Total Depend			12			
Total Claims			13			

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep						
Total Depend						
Total Claims						